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D. BRUCE

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EXAMINER

COVER LETTER

Division of Corporations	
	BRUNE DEVELOPMENT LLC
Name of I	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
James A. Brune	
Name of Person	
Coulter Brune Development L	LC 📑
Firm/Company	
PO Box 4473	LC MAY 16 PH E
Address	
Milton, Florida 32572	
City/State and Zip Code	
Only is that and any code	
iedeiflver120@vahoo.com	
jedeiflyer120@yahoo.com E-mail address: (to be used for future annual report n	notification)
For further information concerning this matt	er, please call:
James A. Brune	_ at (<u>850</u>) <u>221-4808</u>
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following	ng amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

TO: Registration Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company: Coulter Brune Development LLC	
2. (a) Principal office address of limited liability con	npany: 6953 Summit Place
(Note: MUST BE STREET ADDRESS)	Milton, Florida 32570
(b) Mailing address of limited liability company:	PO Box 4473
(Note: MAY BE POST OFFICE BOX)	Milton, Florida 32572
12/13/2005	L05000118818
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	n on the records of the Florida Dept. of State:
Registered Agent:	Kramer A Litvak
Registered Office Address:	226 East Government Street Pensacola, Florida 32502
(b) Enter name of <u>NEW Registered Agent</u> and/or	NEW Registered Office address:
<u>NEW</u> Registered Agent:	James A. Brune
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	6953 Summit Place
	Milton ,FL32570
If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the char of the members of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or authorized representative of a member	the Florida street address of the registered office
James A. Bruns	
James A. Brune Printed or typed name of signee	
I hereby accept the appointment as registered agent of comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of no Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability con Signature of Registered Agent	and agree to act in this capacity. I further agree to be proper and complete performance of my duties, by position as registered agent as provided for in to merely reflect a change in the registered office inpany has been notified in writing of this change.
Division of Corporations, P.O. Bo	ox 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (05/08)